

VA MICU

This policy is designed to:

- a. Delineate the responsibilities of interns and residents in the MICU at the VA Medical Center.
- b. Ensure appropriate coverage of ICU patients during day and night hours.
- c. Specify the algorithm for admitting patients to the MICU.
- d. Specify the policy for transfer out of the unit.
- e. Delineate the Department's policy for off-service ICU patients.

1. VA Medical Center MICU

- a. The MICU team will consist of two upper level residents and two R-1 residents with 1-2 being Mercy interns and 0-1 being an ER resident.
- b. The team will be responsible for all patients admitted to the Pink Team located in the MICU, CICU, or SICU.
- c. Call for all residents will be every fourth night with 4 days off per month. Each resident (including R-1 and upper level residents) will be excused from duties post-call 30 hours after arrival and will work no more than 80 hours per week on average.
- d. When a Pink upper level resident is not on-call, the service will be covered by the Blue Team resident. The other Pink resident, or Blue Team resident (whoever is on call) will supervise any admissions to the Pink team after 5pm.
- e. When the Pink upper level resident is post-call, the other Pink Resident, or Blue Resident, or VA-DF will supervise the Pink team interns. In the event that no resident is available, the Pulmonary Fellow will supervise the Pink Team Interns.
- f. All ICU admissions are supervised by an upper level resident or a Pulmonary fellow. All admissions require a supervisory note from an upper level resident or fellow.
- g. Clinic will be canceled for all residents on the post-call day.
- h. Emergency Medicine interns may attend their Wednesday morning conference every week, except for their post-call day. They will not be responsible for attending work rounds on these days and therefore must provide the team with detailed sign-out on Tuesday evening.

2. Admission Flow to the ICU Team

- a. The cap on patient census for the ICU team is 14 (fourteen) patients. Should additional patients require ICU admission when the team is at 14 patients, then the admissions should be directed to the Cardiology (Blue) Team or Surgery.
- b. Once the census has reached 12 (twelve) patients, patients should be appropriately triaged to Cardiology or Surgery, if possible.

3. Transfers out of the MICU

- a. When a patient is transferred out of the VA MICU, a floor bed is required for the accepting team to be contacted.
- b. When a patient is transferred to a floor team, the receiving R-1 resident will write an accept note and present the patient to the team and attending the following morning.

4. Off-service ICU patients

- a. At the VA, the Pink team may have primary responsibility for MICU patients who may be temporarily located in the CICU or SICU until a MICU bed becomes available.
- b. The VA MICU team does not care for patients boarding in the ICU on telemetry. When a telemetry bed is available, the patient will be transferred to the appropriate team for further care.

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